



BATTLE GROUND
PUBLIC SCHOOLS

*Inspiring excellence by connecting every student
to a positive future in a competitive global economy.*

Co-Location of School-Based Mental Health Services: Building Sustainability Through School-Community Partnerships

Introductions..



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Denny Waters, Deputy Superintendent
Battle Ground Public Schools

waters.denny@battlegroundps.org

Sandy Mathewson, Director of Social
Emotional Learning

Battle Ground Public Schools

Mathewson.Sandy@battlegroundps.org

maike
& associates

Michelle Maike, Director
Maike & Associates, LLC

mmaike@olypen.com

Megan Osborne, Research Associate
Maike & Associates, LLC

megan.b.osborne@gmail.com

Learning Objectives

1

List the foundational supports needed for the effective creation of a school-community agency mental health services program

2

Explain key components of an effective school-community health provider partnership

3

Describe expected outcomes of an effective school-community health provider partnership



BATTLE GROUND PUBLIC SCHOOLS

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- 273 Square Miles
- 18 Schools - 2 Comprehensive High Schools, 7 Primary Schools, 6 Middle Schools and 3 Alternative Schools
- 13,000 Students
- 30% Free/Reduced Lunch
- Suburban to Rural
- 1,400 Staff Members

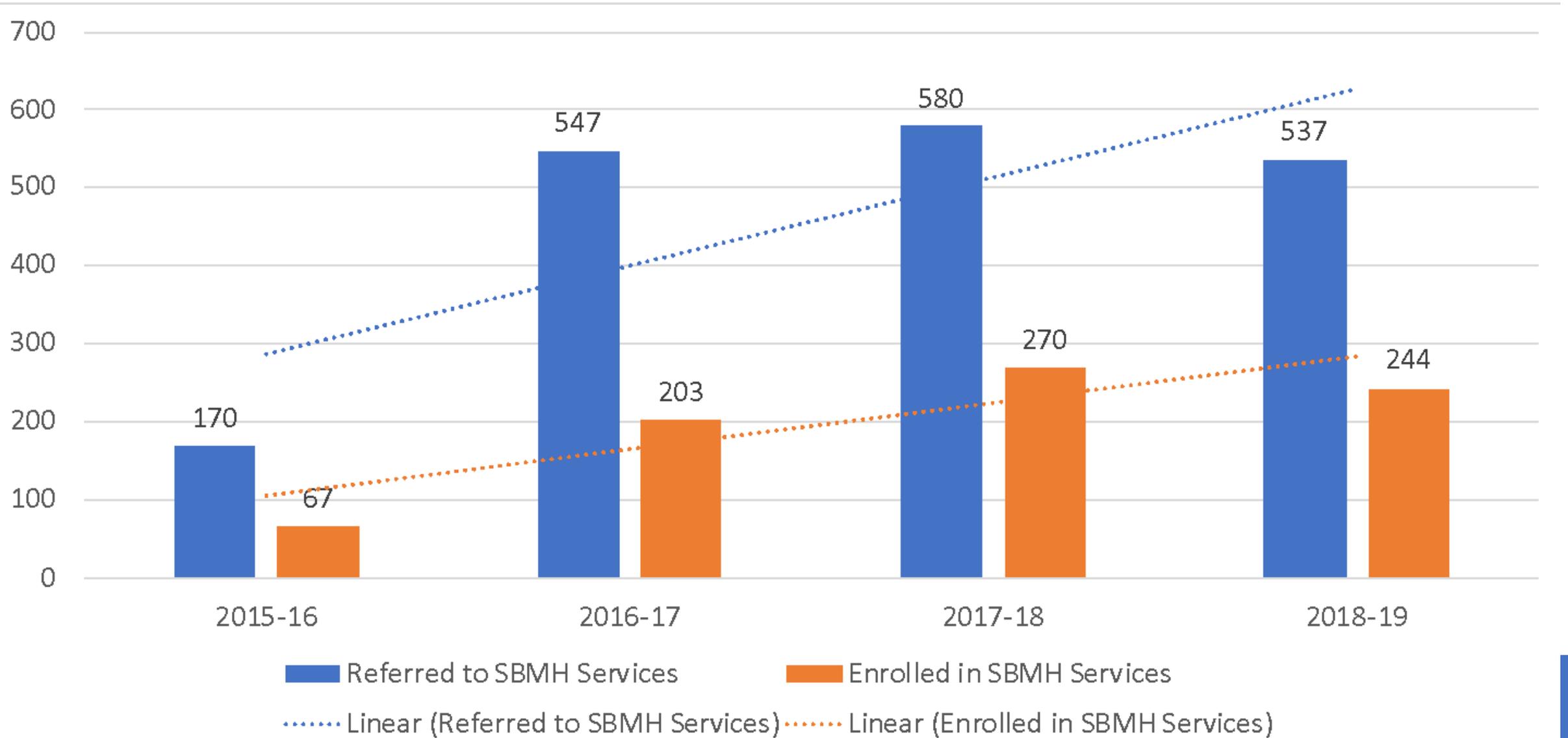
When it comes to kids, we are just like everyone else...

A growing need to respond to the increased social, emotional and behavioral needs of children

- increased behavioral concerns
- increase in students with mental health needs
- growing SPED and 504 populations
- stressed and concerned staff



Program Highlights



Over 1,800 students referred to services with nearly 800 served directly through school-based mental health services.

“The most helpful thing has been having a counselor I can go to at school. It has helped very much, and my attendance has gotten better ever since.”

– Student Client

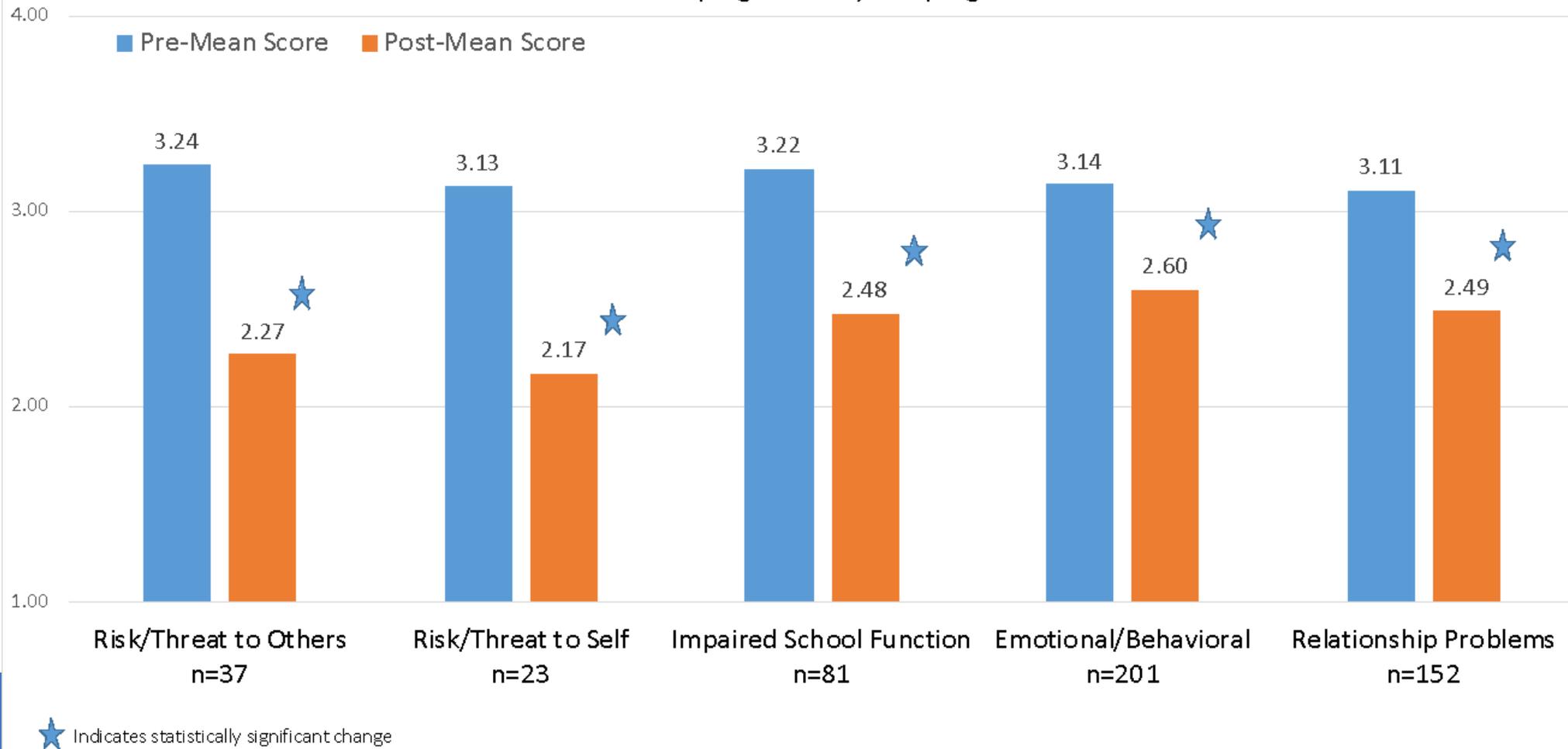
“Due to consumer's transportation issues and location, it was very helpful for consumer to be able to receive services at the school. This allowed her to be consistent in going to and receiving treatment.”

– Mental Health Specialist

Reduced barriers to care.

CHANGE IN PROBLEM SEVERITY MEAN SCORES FOR MODERATE/SEVERE YOUTH: PRE VS. POST

Mean score at program entry and program exit



Statistically significant reductions in problem severity for those at highest risk.

*“[Program services have] helped me overcome my bad thoughts
about killing myself.”
– Student client, 2017-2018*

*“The most helpful thing is that I'm starting to love myself again,
and I'm able to control my anxiety better.”
– Student client 2018-2019*

Providing potentially life-saving access to care.

A dark, irregular ink blot with white text "How we got there..." centered inside it. The blot is surrounded by a light, textured background with scattered dark specks.

How we got
there...



*Connecting, Detecting, and Responding
for the Mental Health and Wellbeing of
Washington Students*

Goals:

- 1) Improve school climate and safety,**
- 2) Increase access to mental health services, and**
- 3) Increase awareness of mental health issues.**



Advancing Wellness and Resilience in Education

Goal 1: Improve School Climate and Safety

Activities:

- Positive Behavior Intervention Supports (PBIS)
- School-wide information system (SWIS)
- Student Assistance Program Prevention and Intervention (P.I.) services
- Annual school climate survey

Objectives:

- Decrease alcohol use
- Decrease marijuana use
- Decrease bullying
- Increase positive school climate
- Reduce suspension/expulsions

Goal 2: Increase Access to Mental Health Services

Activities:

- Develop mental health referral process
- Deliver school-based Mental Health services
- Staff training
- Engage Parents
- Network and link with community partners and service agencies

Objectives:

- Increase # of students receiving school & community based mental health services
- Increase adult knowledge of mental health issues and how to refer youth
- Increase collaboration between school & community mental health providers

Goal 3: Improve Awareness of Mental Health Issues

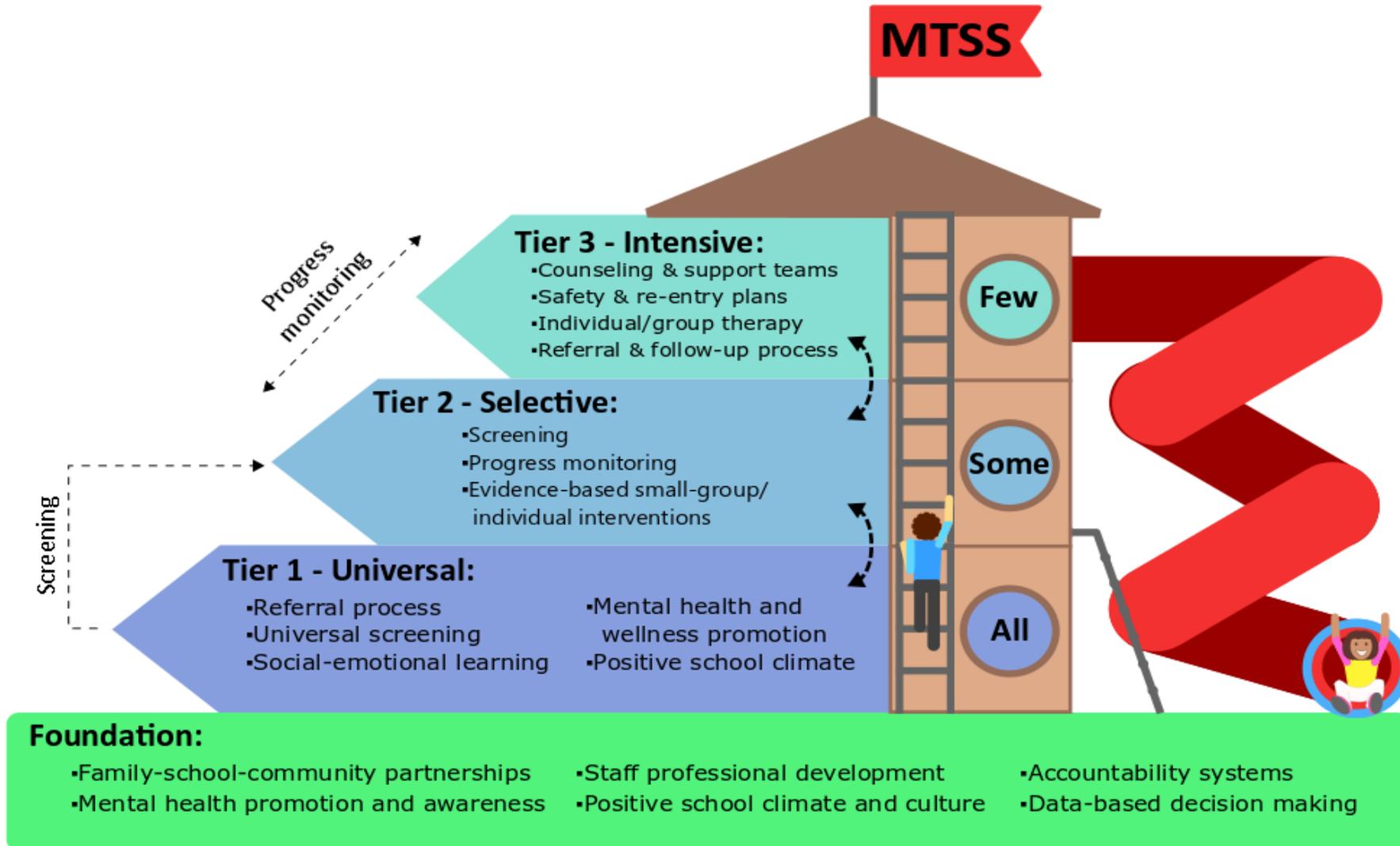
Activities:

- Select and train local Youth Mental Health First Aid (YMHFA) trainers
- Provide Battle Ground community/school members YMHFA each year
- Train school staff and others in Adverse Childhood Experiences (ACE's) trauma informed care, etc.)
- Develop Mental Health resource list

Objectives:

- Increase # of individuals receiving YMHFA by at least 125 annually
- Increase # of YMHFA certified trainers
- Increase adult awareness of youth mental health & outreach

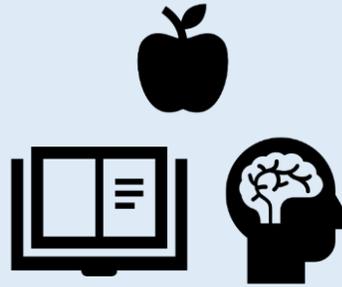
Multi-Tiered System of Supports (MTSS) Framework



Foundational Best Practices



Family-school-
community
partnerships



Staff professional
development



Data-based
decision making



Mental health
promotion &
awareness



Positive school
climate & culture



Accountability
systems

Foundational Supports in Practice...

1

District Office
Leadership:
Superintendent,
Deputy
Superintendent,
& School Board

2

Policy

3

Positive
Behavior
Interventions
and Supports
(PBIS)

4

Partnerships

Guiding Principles:

1

Sustainability starts day one

2

Strength based approaches

3

Evidenced based practices

4

Collection and use of data



Laying the
Foundation...

1. Request for
Proposal (developed
with Education
Service District 112) to
Community Mental
Health Providers

REQUIREMENTS of RFP:

“Explain how you will create a sustainable school based mental health model?”

- Master’s level clinicians
- Minimum one day a week per school
- “Payer of last resort”

2. Establish Building-level Administration Responsibilities

ESTABLISHING BUILDING READINESS:

- Identification Point of Contact
- Confidential/protected space
- List of families who have been identified and agree to therapeutic services

3. Implementing a Point of Contact (POC) System

POINT OF CONTACT:

- One per building (counselor or psychologist)
- All referrals funnel thru POC
- “Soft Hand Off”
 - School counselor makes initial contact with parent/ guardian
 - Explains School-based Mental Health Services
 - Answers questions
 - Meets weekly with therapist

4. Sustainability Starts Day One

SUSTAINABILITY:

- Create a shared vision & goals
- Build mutual respect and trust
- Clearly define roles and responsibilities
- Provide opportunities for training/professional development and “cross pollination” of school and mental health cultures
- Work with stakeholders locally and statewide to advocate for and develop systems that work.

A dark, irregular ink blot with splatters on a white background. The blot is roughly circular but has jagged, feathered edges. The color is a deep, dark blue or black. There are several smaller, lighter splatters around the main blot, particularly towards the top and right sides. The overall effect is that of a fresh ink spill or a hand-drawn mark.

Implementation...

Year One: “Forming”

- Planning year, 2014-2015
- Piloted POC system at one elementary building
- Developed data collection tools
- Developed Request for Proposal for Community Mental Health providers
- Developed Provider Agreement

Year Two: “Storming”

- RFP issued; agency(s) selected; MOU’s signed
- Therapists hired, training with POC’s
- “Same day, full day” schedules implemented
- Waves of service implementation based on building readiness
- PBIS reaches all buildings, Suicide Prevention policy established, protocols put into place

170 students/families referred, 67 served

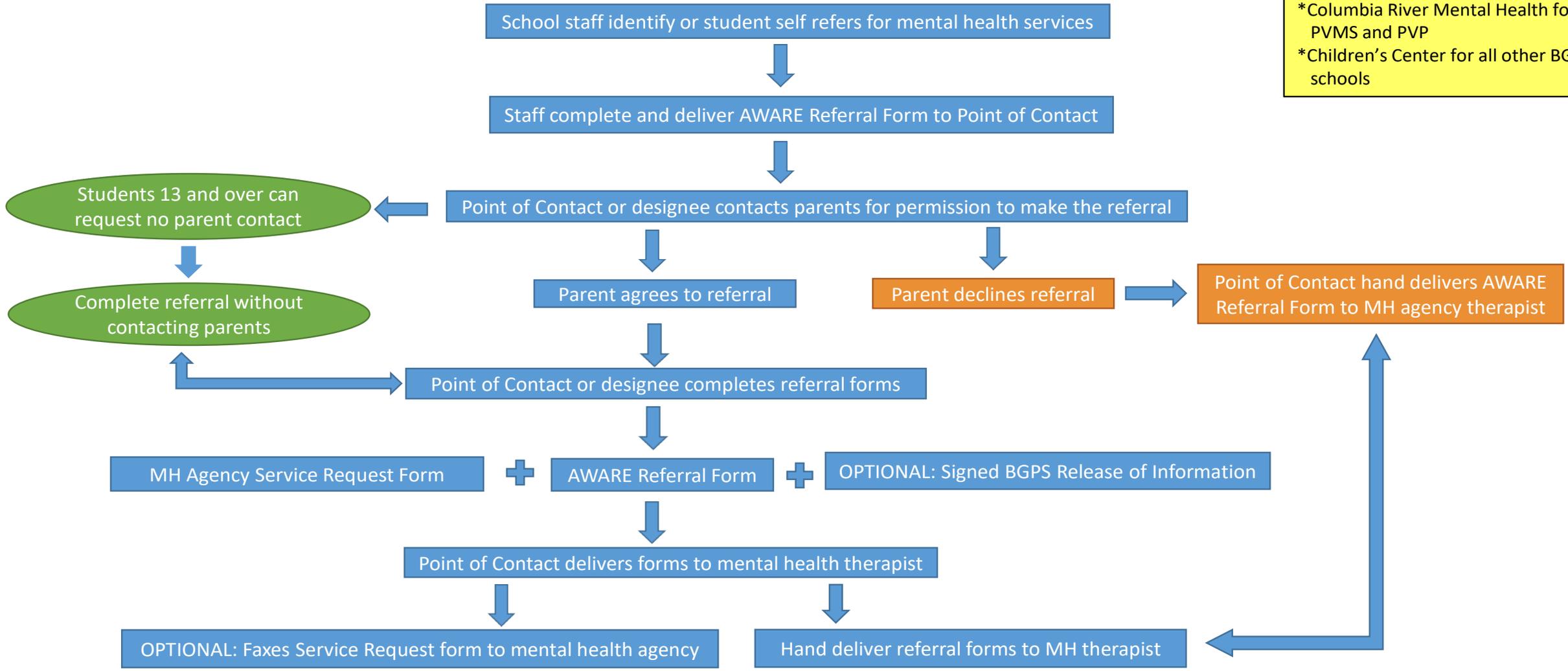
Year Three: “Norming”

- Full year of services
- All buildings one day, increase to two days, as needed
- Referral process fully implemented; therapists integrated
- Tier 1 PBIS implemented district wide, Tier 2 services beginning
- Therapeutic services extended during summer months

547 students/families referred, 203 served

AWARE MENTAL HEALTH REFERRAL PROCESS

Mental Health Agency=
*Columbia River Mental Health for
PVMS and PVP
*Children's Center for all other BGPS
schools



Year Four: “Performing”

- Therapists returning for 2nd or 3rd year in the same building
- POC's and therapist working collaboratively together
- Integration of systems

580 students/families referred, 270 served

Year Five: “Wow!”

- 537 students referred
- 326 youth screened for mental health disorders
- 244 (75%) of those screened are enrolled and receiving school based mental health services
- 193 referred to other school-based services or community providers

**School-based MH services continue into
2019-2020 school-year**



Sustaining
Outcomes...

Value Added

- Counselors in every building
- Suicide Prevention Policy, protocols & Intervention Process
- K-8 Second Step SEL program with fidelity measures (5-8)
- Second Step Bullying Prevention Program (K-4)
- DATALINK- Skyward to SWIS
- Building Response Plans
- Washington State University CLEAR grant (trauma informed classrooms)
- Coherence work

Long-term Sustainability

Partnerships:

- Memorandum Of Understanding (MOU's) with **all** county mental health providers

Systems:

- MTSS development
- Creation of district [PBIS Handbook](#), [Flowchart](#), and [Tiered Explanation Document](#)
- Consistent and prioritized Professional Development for all staff
- Team Initiated Problem Solving (TIPS) meeting structure



Discussion & Questions

Review of Learning Objectives

List the foundational supports needed for the effective creation of a school-community agency mental health services program

Buy-In

Policy Directive

District Leadership

Accountability Systems

Dad-based Decision Making

Staff Professional Development

Positive School Climate & Culture

Family-school-community Partnerships

Mental Health Promotion & Awareness

Review of Learning Objectives

Explain three key components of an effective school-community health provider partnership

Readiness

Creating a Shared Language

Communication & Problem Solving Process

Point of Contact

Memorandum of Understanding

Third Party Liaison

Review of Learning Objectives

Describe three expected outcomes of an effective school-community health provider partnership.

Increased Access to Care

Reduced Problem Behavior

Reduced Barriers

Sustainability of services

Thank you!



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maike
& associates

Michelle Maike, Director

Maike & Associates, LLC

mmaike@olypen.com

Megan Osborne, Research Associate

Maike & Associates, LLC

megan.b.osborne@gmail.com